

FORM COR-C/OH

CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

7036

1 ACCOUNT #		2 Total pages filed: 22		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME		MS / MRS / MR Mr.	FIRST Richard	MI	Date Received
		NICKNAME Rick	LAST Reed	SUFFIX	
4 ORIGINAL REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input checked="" type="checkbox"/> 8th day before election			<input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) <input type="checkbox"/> Final report
5 ORIGINAL PERIOD COVERED		Month Day Year 01 / 25 / 2008 THROUGH 02 / 23 / 2008			Date Hand-delivered or Date Postmarked Receipt # Legal Date Processed Date Imaged

6 EXPLANATION OF CORRECTION

The original report failed to include information regarding the following political expenditures that were made during the reporting period:

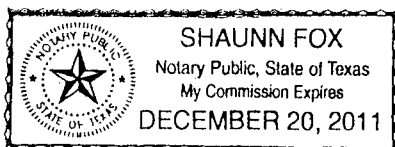
- (1) a political expenditure of \$31.12 made to CheckMark Typesetting on January 29, 2008 (see page 13 of the corrected report);
- (2) a political expenditure of \$719.00 made to Corporate Citizen Group on February 19, 2008 (see page 13 of the corrected report); and
- (3) a political expenditure of \$3,750.00 made to Diane Weidenkopf on February 19, 2008 (see page 19 of the corrected report).

The additional political expenditures increase the amount of total political expenditures from \$9,499.29, the amount originally reported, to \$13,999.41 (see page 2 of the corrected report).

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:



☐ I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Rick Reed

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by

this the 15 day of January

20 09, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)
00006613

2 PAGE #
1 of 20

**3 CANDIDATE /
OFFICEHOLDER
NAME**

MS / MRS / MR

Mr.

FIRST

Richard

MI

NICKNAME

Rick

LAST

Reed

SUFFIX

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

**4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS**
☐ Change of Address

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

11614 Anatole Court
Austin, TX 78748-2820
**5 CAMPAIGN
TREASURER
NAME**

MS / MRS / MR

Mr.

FIRST

Glenn

MI

NICKNAME

Pete

LAST

Steele

SUFFIX

Jr.

**6 CAMPAIGN
TREASURER
ADDRESS**

(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

3120 Central Mall Drive
Port Arthur, TX 77642-8039
**7 CAMPAIGN
TREASURER
PHONE**

AREA CODE

PHONE NUMBER

EXTENSION

(409) 724-6644

8 REPORT TYPE
☐

January 15

☐

30th day before election

☐

Runoff

☐15th day after campaign treasurer
appointment (officeholder only)☐

July 15

☒

8th day before election

☐

Exceeded \$500 limit

☐

Final report (Attach C/OH - FR)

**9 PERIOD
COVERED**

Month

Day

Year

THROUGH

Month

Day

Year

01/25/2008

02/23/2008

10 ELECTION

Month

Day

Year

03/04/2008

ELECTION TYPE

☒

Primary

☐

Runoff

☐

General

☐

Special

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)
District Attorney

**13 NOTICE
OF DIRECT
CAMPAIGN
EXPENDITURE
BY OTHER
INDIVIDUALS**

.. Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ..

Name

Address/PO Box;

Apt. / Suite #;

City;

State;

Zip Code

☐ additional pages
GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Reed, Richard (Mr.)

15 ACCOUNT # (Ethics Commission filers)
0000661316 NOTICE
FROM
POLITICAL
COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

☐ additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

6,620.41

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

0.00

4. TOTAL POLITICAL EXPENDITURES

\$

13,999.41

CONTRIBUTION
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

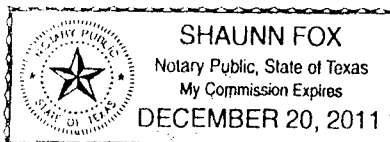
2,579.65

OUTSTANDING
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

1,000.00

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Richard Reed

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Richard Reed, this the 15 day
of January, 2009, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/9 Report: 3/20

2 FILER NAME Reed, Richard (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00006613

4 Date

01/30/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Ansevin, Allen (Mr.)**6** Contributor address; City; State; Zip Code
2127 MacArthur Street
Houston, TX 77030-2103**7** Amount of
contribution (\$)

\$25.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

Date

02/05/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Chapman, Sarah (Ms.)Contributor address; City; State; Zip Code
108 Ellen Lane
Trinidad, TX 75163-3120Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Community Supervision OfficerEmployer (See Instructions)
Henderson County, Texas

Date

01/31/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Coats, Sam (Hon.)Contributor address; City; State; Zip Code
2 Grantley Court
Dallas, TX 75230-1969Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Aviation/Business ConsultingEmployer (See Instructions)
Self- Employed

Date

02/22/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Cooley, Charles (Mr.)Contributor address; City; State; Zip Code
4922 Honeysuckle Boulevard
Columbus, OH 43230-1022Amount of
contribution (\$)

\$15.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/09/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Coombes, Sherry (Ms.)Contributor address; City; State; Zip Code
1604 Garnaas Drive
Austin, TX 78758-1188Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/9 Report: 4/20

2 FILER NAME Reed, Richard (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00006613

4 Date

02/06/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Craven, Elsie (Ms.)

6 Contributor address; City; State; Zip Code
1302 West Ave.
Suite B
Austin, TX 78701-1716

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Attorney & Counselor at Law

10 Employer (See Instructions)
Self-Employed

Date

02/21/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Dieter, Alison (Ms.)

Contributor address; City; State; Zip Code
12009 Tanglebriar Trail
Austin, TX 78750-1908

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/15/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Feazell, Vic (Mr.)

Contributor address; City; State; Zip Code
8127 Mesa Drive, B-206
PMB 398
Austin, TX 78759-8632

Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney & Counselor at Law

Employer (See Instructions)
Self-Employed

Date

02/21/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Foley, Ian (Mr.)

Contributor address; City; State; Zip Code
1203 Greenlawn Boulevard
Round Rock, TX 78664-6964

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

Date

02/06/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Fox, Bruce (Mr.)

Contributor address; City; State; Zip Code
404 W. 13th Street
Austin, TX 78701-1825

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney & Counselor at Law

Employer (See Instructions)
Self-Employed

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/9 Report: 5/20	
2 FILER NAME Reed, Richard (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00006613	
4 Date 02/05/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fraze, Patricia (Ms.) 6 Contributor address; City; State; Zip Code 402 E. Main Street Calera, OK 74730-2104	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions)	
Date 01/31/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fredericksen, Cynthia (Ms.) Contributor address; City; State; Zip Code 32 Lo Meadow Bailey, CO 80421-2127	Amount of contribution (\$) \$71.79	In-kind contribution description (if applicable) Postage and Stationery (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Pet Groomer		Employer (See Instructions) Self-Employed	
Date 02/09/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Giblin, Robert (Mr.) Contributor address; City; State; Zip Code 2818 Reynolds Lane Port Neches, TX 77651-5410	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney & Counselor at Law		Employer (See Instructions) Self-Employed	
Date 02/09/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gowens, Ralph (Mr.) Contributor address; City; State; Zip Code 114 Juniper Trail Elgin, TX 78621-5660	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	
Date 02/05/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holgate, Willard (Mr.) Contributor address; City; State; Zip Code 5837 Hilline Road Suite B Austin, TX 78734-1168	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney & Counselor at Law		Employer (See Instructions) Self-Employed	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/9 Report: 6/20

2 FILER NAME Reed, Richard (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00006613

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Lanter, Robert (Mr.)

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

02/15/2008

6 Contributor address; City; State; Zip Code
8815 Balcones Club Drive
Austin, TX 78750-3042

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lanter, Virginia (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

02/08/2008

Contributor address; City; State; Zip Code
220 River Rapids Road
Wimberly, TX 78676-4611

\$400.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lopez, Karen (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

02/14/2008

Contributor address; City; State; Zip Code
1020 Clear Springs Drive
De Soto, TX 75115-4704

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Magro, Helen (Ms.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

02/07/2008

Contributor address; City; State; Zip Code
304 Laurel Glenn Xing
Canton, GA 30114-6662

\$150.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Magro, James (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

02/07/2008

Contributor address; City; State; Zip Code
145 Abbott Dr.
Austin, TX 78737-4534

\$150.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/9 Report: 7/20

2 FILER NAME Reed, Richard (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00006613

4 Date

02/13/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Mahendru, Vivek (Dr.)

6 Contributor address; City; State; Zip Code
7109 Villa Maria Lane
Austin, TX 78759-7776

7 Amount of
contribution (\$)

\$250.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Physician

10 Employer (See Instructions)
Self-Employed

Date

02/23/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Maison, Donald (Mr.)

Contributor address; City; State; Zip Code
P.O. Box 192671
Dallas, TX 75219-8525

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Chief Executive Officer/Attorney & Counselor at Law

Employer (See Instructions)
PWA Coalition of Dallas, Inc.

Date

02/23/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
McGee, Dianna (Ms.)

Contributor address; City; State; Zip Code
610 Rose Hill Lane
Cedar Hill, TX 75104-4741

Amount of
contribution (\$)

\$43.98

In-kind contribution
description (if applicable)
T-Shirts

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Clerk

Employer (See Instructions)
Dallas County Constable, Precinct 5

Date

02/05/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Morse, Nancy (Ms.)

Contributor address; City; State; Zip Code
8425 Jamestown Drive
Austin, TX 78758-7922

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Adjunct Faculty

Employer (See Instructions)
Austin Community College

Date

02/13/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Morse, Nancy (Ms.)

Contributor address; City; State; Zip Code
8425 Jamestown Drive
Austin, TX 78758-7922

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Adjunct Faculty

Employer (See Instructions)
Austin Community College

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 6/9 Report: 8/20	
2 FILER NAME Reed, Richard (Mr.)				3 ACCOUNT # (Ethics Commission filers) 00006613	
4 Date 02/22/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Prater, Dwight (Mr.)		7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 2310 Abbey Road Cape Girardeau, MO 63701-1505			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Administrator			10 Employer (See Instructions) Southeast Missouri State University		
Date 02/09/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reed, Charles (Hon.)		Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 1307 Royal Oaks Drive Waco, TX 76710-4161			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 02/20/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reed, Dick (Hon.)		Amount of contribution (\$) \$23.00	In-kind contribution description (if applicable) County Map	
Contributor address; City; State; Zip Code 1551 Oak Knoll Street Dallas, TX 75208-2528			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Retired			Employer (See Instructions)		
Date 01/26/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reed, Helen (Ms.)		Amount of contribution (\$) \$349.34	In-kind contribution description (if applicable) Materials for Erection of Campaign Signs	
Contributor address; City; State; Zip Code 1551 Oak Knoll Street Dallas, TX 75208-2528			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Retired			Employer (See Instructions)		
Date 01/27/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reed, Helen (Ms.)		Amount of contribution (\$) \$25.95	In-kind contribution description (if applicable) T-Shirt Transfer Packet	
Contributor address; City; State; Zip Code 1551 Oak Knoll Street Dallas, TX 75208-2528			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Retired			Employer (See Instructions)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/9 Report: 9/20

2 FILER NAME Reed, Richard (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00006613

4 Date

01/30/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Reed, Helen (Ms.)6 Contributor address; City; State; Zip Code
1551 Oak Knoll Street
Dallas, TX 75208-25287 Amount of
contribution (\$)

\$59.11

8 In-kind contribution
description (if applicable)
Materials for
Construction and
Erection of Campaign
Signs(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)
Retired

10 Employer (See Instructions)

Date

02/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Reed, Helen (Ms.)Contributor address; City; State; Zip Code
1551 Oak Knoll Street
Dallas, TX 75208-2528Amount of
contribution (\$)

\$36.01

In-kind contribution
description (if applicable)
Color Ink Printer
Cartridge(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

Date

02/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Reed, Helen (Ms.)Contributor address; City; State; Zip Code
1551 Oak Knoll Street
Dallas, TX 75208-2528Amount of
contribution (\$)

\$150.16

In-kind contribution
description (if applicable)
Materials for
Construction and
Erection of Campaign
Signs(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

Date

02/02/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Reed, Helen (Ms.)Contributor address; City; State; Zip Code
1551 Oak Knoll Street
Dallas, TX 75208-2528Amount of
contribution (\$)

\$94.88

In-kind contribution
description (if applicable)
Materials for Erection of
Campaign Signs(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

Date

02/04/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Reed, Helen (Ms.)Contributor address; City; State; Zip Code
1551 Oak Knoll Street
Dallas, TX 75208-2528Amount of
contribution (\$)

\$43.24

In-kind contribution
description (if applicable)
Materials for Erection of
Campaign Signs(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/9 Report: 10/20

2 FILER NAME Reed, Richard (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00006613

4 Date

02/10/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Reed, Helen (Ms.)

6 Contributor address; City; State; Zip Code
1551 Oak Knoll Street
Dallas, TX 75208-2528

7 Amount of contribution (\$)

\$267.03

8 In-kind contribution description (if applicable)
Materials for Erection of Campaign Signs

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Retired

10 Employer (See Instructions)

Date

02/13/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Reed, Helen (Ms.)

Contributor address; City; State; Zip Code
1551 Oak Knoll Street
Dallas, TX 75208-2528

Amount of contribution (\$)

\$60.92

In-kind contribution description (if applicable)
Envelopes and Postage

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

Date

02/21/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Russell, Wade (Mr.)

Contributor address; City; State; Zip Code
404 W. 13th Street
Austin, TX 78701-1825

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney & Counselor at Law

Employer (See Instructions)
Self-Employed

Date

02/05/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sayward, Amy (Prof.)

Contributor address; City; State; Zip Code
902 Palmer Drive
Apt. 3
Murfreesboro, TN 37130-2674

Amount of contribution (\$)

\$20.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
History Professor

Employer (See Instructions)
Middle Tennessee State University

Date

02/03/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Schmerler, Willie (Mr.)

Contributor address; City; State; Zip Code
2018 Kenwood Avenue
Austin, TX 78704-4438

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney & Counselor at Law

Employer (See Instructions)
Self-Employed

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/9 Report: 11/20

2 FILER NAME Reed, Richard (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00006613

4 Date

02/04/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Smith, Robert (Mr.)

6 Contributor address; City; State; Zip Code
930 FM 1460
Georgetown, TX 78626-3906

7 Amount of
contribution (\$)

\$500.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Attorney & Counselor at Law

10 Employer (See Instructions)
Self-Employed

Date

02/18/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Texas Moratorium Network PAC

Contributor address; City; State; Zip Code
3616 Far West Boulevard
Suite 117, Box 251
Austin, TX 78731-3042

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Yerlig, Christopher (Mr.)

Contributor address; City; State; Zip Code
120 Pulpit Hill Road
Amherst, MA 01002-4011

Amount of
contribution (\$)

\$10.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Actor

Employer (See Instructions)
Self-Employed

Date

02/15/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Zapata, Cheryl (Ms.)

Contributor address; City; State; Zip Code
9547 Angleridge Road
Dallas, TX 75238-1803

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Flight Attendant

Employer (See Instructions)
Southwest Airlines

LOANS**SCHEDULE E**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/1 Report: 12/20

2 FILER NAME Reed, Richard (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00006613

4

TOTAL OF UNITEMIZED LOANS:

⇒⇒⇒⇒⇒⇒

\$

5 Date of loan

02/20/2008

7 Name of lender

Helen, Reed (Ms.)

☐ out-of-state PAC (ID# _____)**9** Loan Amount (\$)

\$1,000.00

6 Is lender a
financial institution?

No

8 Lender address; City; State; Zip Code1551 Oak Knoll Street
Dallas, TX 75208-2528**10** Interest rate

1.0 %

11 Maturity date

02/20/2009

12 Principal occupation / Job title (See Instructions)
Retired**13** Employer (See Instructions)**14** Description of Collateral☒ none**15** GUARANTOR
INFORMATION**16** Name of guarantor**18** Amount Guaranteed (\$)**17** Guarantor address; City; State; Zip Code☒ not applicable**19** Principal Occupation**20** Employer

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/7 Report: 13/20

2 FILER NAME Reed, Richard (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00006613

4 Date

02/11/2008

5 Payee name

Advocacy, Inc.

7 Amount
(\$)

\$710.85

6 Payee address; City; State; Zip Code1001 G Street, NW
Suite 460-A West
Washington, DC 20001-4514**8** Purpose of payment (See instructions regarding type of information required.)

Email Addresses

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

01/29/2008

Payee name

CheckMark Typesetting

Amount
(\$)

\$31.12

Payee address; City; State; Zip Code

3217 N. IH 35
Austin, TX 78722-2203

Purpose of payment (See instructions regarding type of information required.)

Magnetic Lapel Badges

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

Date

02/19/2008

Payee name

Corporate Citizen Group

Amount
(\$)

\$719.00

Payee address; City; State; Zip Code

P.O. Box 222195
Dallas, TX 75222-2195

Purpose of payment (See instructions regarding type of information required.)

Web Site Hosting, Communications Maintenance, etc.

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

Date

01/31/2008

Payee name

FedEx Kinko's

Amount
(\$)

\$71.15

Payee address; City; State; Zip Code

5601 Brodie Lane
Sunset Valley, TX 78745-2538

Purpose of payment (See instructions regarding type of information required.)

Letterhead Stationery

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/7 Report: 14/20

2 FILER NAME Reed, Richard (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00006613

4 Date

02/07/2008

5 Payee name

FedEx Kinko's

7

Amount

(\$)

\$18.25

6 Payee address; City; State; Zip Code5601 Brodie Lane
Sunset Valley, TX 78745-2538**8** Purpose of payment (See instructions regarding type of information required.)

Digital Scanning of Documents

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

02/07/2008

Payee name

FedEx Kinko's

Amount

(\$)

\$21.17

Payee address; City; State; Zip Code

5601 Brodie Lane
Sunset Valley, TX 78745-2538

Purpose of payment (See instructions regarding type of information required.)

Photocopies

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

Date

02/07/2008

Payee name

FedEx Kinko's

Amount

(\$)

\$0.86

Payee address; City; State; Zip Code

5601 Brodie Lane
Sunset Valley, TX 78745-2538

Purpose of payment (See instructions regarding type of information required.)

Photocopies

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

Date

01/31/2008

Payee name

Inovar Packaging Group

Amount

(\$)

\$410.00

Payee address; City; State; Zip Code

602 Magic Mile
Arlington, TX 76011-5108

Purpose of payment (See instructions regarding type of information required.)

Bumper Stickers

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/7 Report: 15/20

2 FILER NAME Reed, Richard (Mr.)**3** ACCOUNT #

(Ethics Commission filers)

00006613

4 Date

02/13/2008

5 Payee name

Mail & More

7

Amount

(\$)

\$40.67

6 Payee address; City; State; Zip Code

9901 Brodie Lane

Suite 160

Austin, TX 78748-5892

8 Purpose of payment (See instructions regarding type of information required.)

Shipping Fees

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

Date

02/04/2008

Payee name

Nelda Well -Spears, Tax Assessor/Collector

Amount

(\$)

\$5.00

Payee address; City; State; Zip Code

5501 Airport Boulevard

Austin, TX 78751-1410

Purpose of payment (See instructions regarding type of information required.)

Notary Fee

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

Date

01/30/2008

Payee name

PayPal, Inc.

Amount

(\$)

\$1.03

Payee address; City; State; Zip Code

2211 North First Street

San Jose, CA 95131-2021

Purpose of payment (See instructions regarding type of information required.)

Financial Transaction Fee

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

Date

02/01/2008

Payee name

PayPal, Inc.

Amount

(\$)

\$0.59

Payee address; City; State; Zip Code

2211 North First Street

San Jose, CA 95131-2021

Purpose of payment (See instructions regarding type of information required.)

Financial Transaction Fee

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/7 Report: 16/20

2 FILER NAME Reed, Richard (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00006613

4 Date

02/05/2008

5 Payee name

PayPal, Inc.

7 Amount
(\$)

\$1.75

6 Payee address; City; State; Zip Code2211 North First Street
San Jose, CA 95131-2021**8** Purpose of payment (See instructions regarding type of information required.)

Financial Transaction Fee

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

Date

02/05/2008

Payee name

PayPal, Inc.

Amount
(\$)

\$3.20

Payee address; City; State; Zip Code

2211 North First Street
San Jose, CA 95131-2021

Purpose of payment (See instructions regarding type of information required.)

Financial Transaction Fee

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

Date

02/07/2008

Payee name

PayPal, Inc.

Amount
(\$)

\$4.65

Payee address; City; State; Zip Code

2211 North First Street
San Jose, CA 95131-2021

Purpose of payment (See instructions regarding type of information required.)

Financial Transaction Fee

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

Date

02/07/2008

Payee name

PayPal, Inc.

Amount
(\$)

\$4.65

Payee address; City; State; Zip Code

2211 North First Street
San Jose, CA 95131-2021

Purpose of payment (See instructions regarding type of information required.)

Financial Transaction Fee

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/7 Report: 17/20

2 FILER NAME Reed, Richard (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00006613

4 Date

02/09/2008

5 Payee name

PayPal, Inc.

7 Amount
(\$)

\$6.10

6 Payee address; City; State; Zip Code2211 North First Street
San Jose, CA 95131-2021**8** Purpose of payment (See instructions regarding type of information required.)

Financial Transaction Fee

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

Date

02/13/2008

Payee name

PayPal, Inc.

Amount
(\$)

\$1.03

Payee address; City; State; Zip Code

2211 North First Street
San Jose, CA 95131-2021

Purpose of payment (See instructions regarding type of information required.)

Financial Transaction Fee

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

Date

02/14/2008

Payee name

PayPal, Inc.

Amount
(\$)

\$3.20

Payee address; City; State; Zip Code

2211 North First Street
San Jose, CA 95131-2021

Purpose of payment (See instructions regarding type of information required.)

Financial Transaction Fee

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

Date

02/15/2008

Payee name

PayPal, Inc.

Amount
(\$)

\$3.20

Payee address; City; State; Zip Code

2211 North First Street
San Jose, CA 95131-2021

Purpose of payment (See instructions regarding type of information required.)

Financial Transaction Fee

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/7 Report: 18/20

2 FILER NAME Reed, Richard (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00006613

4 Date

02/21/2008

5 Payee name

PayPal, Inc.

7 Amount
(\$)

\$1.75

6 Payee address; City; State; Zip Code2211 North First Street
San Jose, CA 95131-2021**8** Purpose of payment (See instructions regarding type of information required.)

Financial Transaction Fee

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

Date

02/22/2008

Payee name

PayPal, Inc.

Amount
(\$)

\$1.75

Payee address; City; State; Zip Code

2211 North First Street
San Jose, CA 95131-2021

Purpose of payment (See instructions regarding type of information required.)

Financial Transaction Fee

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

Date

02/22/2008

Payee name

PayPal, Inc.

Amount
(\$)

\$0.74

Payee address; City; State; Zip Code

2211 North First Street
San Jose, CA 95131-2021

Purpose of payment (See instructions regarding type of information required.)

Financial Transaction Fee

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

Date

02/03/2008

Payee name

The Home Depot

Amount
(\$)

\$129.90

Payee address; City; State; Zip Code

8801 S. IH 35
Austin, TX 78744-6713

Purpose of payment (See instructions regarding type of information required.)

Materials for Construction of Campaign Signs

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐

Office sought:

Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/7 Report: 19/20

2 FILER NAME Reed, Richard (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00006613

4 Date

02/05/2008

5 Payee name

Vivify Creative, Inc.

7

Amount

(\$)

\$717.87

6 Payee address; City; State; Zip Code

6800 West Gate Blvd.

#132-349

Austin, TX 78745-4868

8 Purpose of payment (See instructions regarding type of information required.)

Layout, Proofs, Revisions, File Preparation, and Printing of Campaign Pushcards

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

02/05/2008

Payee name

Vivify Creative, Inc.

Amount

(\$)

\$2,588.60

Payee address; City; State; Zip Code

6800 West Gate Blvd.

#132-349

Austin, TX 78745-4868

Purpose of payment (See instructions regarding type of information required.)

Layout, Proofs, Revisions, File Preparation, and Printing of Campaign Pushcards

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

Date

02/19/2008

Payee name

Weidenkopf, Diane (Ms.)

Amount

(\$)

\$3,750.00

Payee address; City; State; Zip Code

407 E. 7th Street

Austin, TX 78701-3316

Purpose of payment (See instructions regarding type of information required.)

Creation of Television Advertisement

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/1 Report: 20/20

2 FILER NAME Reed, Richard (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00006613

<p>4 Date</p> <p>02/22/2008</p>	<p>5 Payee name Contender Consulting</p> <hr/> <p>6 Payee address; City; State; Zip Code 120 Madisons Cove Buda, TX 78610-3218</p> <p>7 Purpose of expenditure (See instructions regarding type of information required.) Campaign Strategy and Consultation</p> <p>(If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<p>8 Amount (\$)</p> <p>\$2,000.00</p> <p><input checked="" type="checkbox"/> Reimbursement from political contributions intended</p>
<p>Date</p> <p>02/14/2008</p>	<p>Payee name Office Depot</p> <hr/> <p>Payee address; City; State; Zip Code 2101 S. Lamar Boulevard Austin, TX 78704-4921</p> <p>Purpose of expenditure (See instructions regarding type of information required.) Photocopies</p> <p>(If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<p>Amount (\$)</p> <p>\$0.35</p> <p><input type="checkbox"/> Reimbursement from political contributions intended</p>
<p>Date</p> <p>02/22/2008</p>	<p>Payee name Opinion Analysts, Inc.</p> <hr/> <p>Payee address; City; State; Zip Code 906 Rio Grande Austin, TX 78701-2222</p> <p>Purpose of expenditure (See instructions regarding type of information required.) Voter List</p> <p>(If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<p>Amount (\$)</p> <p>\$541.25</p> <p><input checked="" type="checkbox"/> Reimbursement from political contributions intended</p>
<p>Date</p> <p>02/21/2008</p>	<p>Payee name Vivify Creative, Inc.</p> <hr/> <p>Payee address; City; State; Zip Code 6800 West Gate Blvd. #132-349 Austin, TX 78745-4868</p> <p>Purpose of expenditure (See instructions regarding type of information required.) Printing of Campaign Pushcards</p> <p>(If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<p>Amount (\$)</p> <p>\$2,209.73</p> <p><input checked="" type="checkbox"/> Reimbursement from political contributions intended</p>